## Issue Classification



| Application/Control No. | Applicant(s)/Patent Under Reexamination |  |  |  |  |  |  |  |
|-------------------------|---|--|--|--|--|--|--|--|
|                         |   |  |  |  |  |  |  |  |
| 10763803                | WANG ET AL.                             |  |  |  |  |  |  |  |
|                         |   |  |  |  |  |  |  |  |
| Examiner                | Art Unit                                |  |  |  |  |  |  |  |
|                         |   |  |  |  |  |  |  |  |
| SCOTT A ZARE            | 3687                                    |  |  |  |  |  |  |  |
| = = =                   |   |  |  |  |  |  |  |  |

| ORIGINAL                            |          |  |    |           |     |         | INTERNATIONAL CLASSIFICATION |   |   |                      |  |  |             |  |  |  |
|-------------------------------------|----------|--|----|-----------|-----|---------|------------------------------|---|---|----------------------|--|--|-------------|--|--|--|
| CLASS SUBCLASS                      |          |  |    |           |     | CLAIMED |                              |   |   |                      |  |  | NON-CLAIMED |  |  |  |
| 705                                 |          |  | 28 |           |     | G       | 0                            | 6 | Q | 10 / 00 (2006.01.01) |  |  |             |  |  |  |
| CROSS REFERENCE(S)                  |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
| CLASS SUBCLASS (ONE SUBCLASS PER BI |          |  |    | S PER BLO | CK) |         |                              |   |   |                      |  |  |             |  |  |  |
| 705                                 | 8        |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     | <u> </u> |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |
|                                     |          |  |    |           |     |         |                              |   |   |                      |  |  |             |  |  |  |

| ⊠     | Claims re | numbere | d in the s | ame orde | r as prese | ented by a | applicant | ☐ CPA ☐ T.D. ☐ R.1.47 |          |       |          |       |          |       |          |
|-------|-----------|---------|------------|----------|------------|------------|-----------|-----------------------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original  | Final   | Original   | Final    | Original   | Final      | Original  | Final                 | Original | Final | Original | Final | Original | Final | Original |
| 1     | 1         | 14      | 17         |          |            |            |           |                       |          |       |          |       |          |       |          |
| -     | 2         | 15      | 18         |          |            |            |           |                       |          |       |          |       |          |       |          |
| -     | 3         | 16      | 19         |          |            |            |           |                       |          |       |          |       |          |       |          |
| 2     | 4         |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 3     | 5         |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 4     | 6         |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 5     | 7         |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 6     | 8         |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 7     | 9         |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 8     | 10        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 9     | 11        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 10    | 12        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 11    | 13        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| -     | 14        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 12    | 15        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |
| 13    | 16        |         |            |          |            |            |           |                       |          |       |          |       |          |       |          |

| /SCOTT A ZARE/ Examiner.Art Unit 3687  (Assistant Examiner) | 11/03/2009<br>(Date) | Total Claims Allowed: |                   |  |  |  |
|---|----------------------|-----------------------|-------------------|--|--|--|
| (Primary Examiner)  | (Date)               | O.G. Print Claim(s)   | O.G. Print Figure |  |  |  |
| (Primary Examiner)  | (Date)               | '                     | 1                 |  |  |  |